DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

(if plural names	s are liste ed <u>E</u>	I, first and sole inventor (if one of the subject o	natter which is o	listed bel	low) or an origir nd for which a	nal, first a patent i	and joint inventor is sought on the	
(check one)	X	is attached hereto.						
		was filed on						
		as Application Serial No.						
		and was amended on	(for the state)					
			(if applicable)					
		e reviewed and understan any amendment referred to		of the abov	ve identified sp	ecification	on, including the	
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).								
application(s) for least one count	or patent try other patent or i	priority benefits under Title or inventor's certificate, or than the United States of nventor's certificate, or any pority is claimed:	§365(a) of any f America, listed l	PCT interr below and	national applica I have also ide	ation which	ch designated at elow any foreign	
Prior Foreign Application(s)				Priority Claimed				
(Number)		(Country)	(Day/Month/Yea	r Filed)		Yes	□ No	
(Number)		(Country)	(Day/Month/Yea	r Filed)		Yes	No	
and, insofar as application in the to disclose mater	the subjo e manne erial infor	fit under Title 35, United Sect matter of each of the clar provided by the first paragemation as defined in Title 3 or application and the nation	aims of this app raph of Title 35, 7, Code of Fede	lication is United Sta ral Regula	not disclosed i ates Code, §11: ations, §1.56(a)	n the pri 2, I acknown	or United States owledge the duty ccurred between	
(Application Se	rial No.)	(Filing Date)	(patented,	– (pending, aba	Status) andoned)			
(Application Ser	rial No.)	(Filing Date)	(patented,	pending, aba	Status) andoned)		_	

(Pro	visional Application No.)	(Filing Date)			
I hereby declare that all state information and belief are belief willful false statements and the and that such willful false state POWER OF ATTORNEY: As this application and transact and Robert C. Kain, Jr., Reg. No.	ieved to be true; and further that the ne like so made are punishable by fin tements may jeopardize the validity on an amed inventor, I hereby appoint the all business in the Patent and Trade	0; Jon A. Gibbons, Reg. No. 37,333; Jose Gutman			
Send Correspondence to:	Fleit, Kain, Gibbons, Gutman & Bongini, P.L. 750 Southeast Third Avenue, Suite 100 Ft. Lauderdale, Florida 33316-1153				
Direct Telephone Calls to:	Robert C. Kain, Jr., (954) 768-9	002			
Jeffrey S. Shapiro	77				
Full name of sole or first invented		2- 07			
Javentor's signature	hy 10	- 22 - 03 Date			
Weston, FL					
Residence					
U.S.	-				
Citizenship					
2800 Hunter Road Post Office Address					
Wester El 2224					
Weston, FL 33331					
Full name of second joint inventor, if	any				
		Date .			
Inventor's signature					
Inventor's signature Residence Citizenship					

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